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Chapter you are filing under:	
☐ Chapter 7	
☐ Chapter 11	
☐ Chapter 12	
Chapter 13	☐ Check if this an amended filing
	☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Kathryn First name A. Middle name Nolan Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have		
	used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0335	

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Debtor 1 Kathryn A. Nolan Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	1600 N.E. 39th Street	If Debtor 2 lives at a different address:		
		Oklahoma City, OK 73111 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Oklahoma County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition,	Check one: Over the last 180 days before filing this petition, I		
		I have lived in this district longer than in any other district.	have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 Kathryn A. Nolan				Case number (if known)					
Par	t 2: Tell the Court About	our Ban	kruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to me under	☐ Cha	pter 7						
		☐ Cha	pter 11						
		☐ Cha	pter 12						
		■ Cha	pter 13						
8.	How you will pay the fee	al	bout how yo	entire fee when I file my p u may pay. Typically, if you attorney is submitting your p address.	are paying	the fee yourself,	you may pay with cash	, cashier's check, or money	
				the fee in installments. If e in Installments (Official Fo		e this option, sigr	n and attach the Applica	ation for Individuals to Pay	
			request tha	t my fee be waived (You m	ay request	this option only i	if you are filing for Chap ome is less than 150% o	oter 7. By law, a judge may, of the official poverty line that	
		a	pplies to you	ur family size and you are ur on to Have the Chapter 7 Fili	nable to pay	the fee in instal	Iments). If you choose to	this option, you must fill out	
9.	Have you filed for bankruptcy within the	□ No.							
	last 8 years?	Yes.							
			District	Western District of Oklahoma	When	8/08/13	Case number	13-13612	
			District		When		Case number		
			District		When		Case number		
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is	☐ Yes.							
	not filing this case with you, or by a business partner, or by an affiliate?	- 103.							
			Debtor				Relationship to y	rou	
			District		When		Case number, if	known	
			Debtor				Relationship to y	rou	
			District		When		Case number, if	known	
11.	Do you rent your residence?	■ No.	Go to li	ine 12.					
	residence :	☐ Yes.	Has yo	ur landlord obtained an evic	tion judgm	ent against you a	and do you want to stay	in your residence?	
				No. Go to line 12.					
				Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	nt About ar	Eviction Judgm	ent Against You (Form	101A) and file it with this	

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Case number (if known)

12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of busi	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State	e & ZIP Code
	it to this petition.		Chec	k the appropriate box	x to describe your business:
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
				Commodity Broker	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most r operations, cash-flow statement, and federal income tax return or if any of these documents in 11 U.S.C. 1116(1)(B).				a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure	
For a definition of <i>small</i>		not filing under Chap	ei II.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am i Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am i	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	perishable goods, or livestock that must be fed, V or a building that needs			
	3 · · · · · · · · · · ·				Number, Street, City, State & Zip Code

Debtor 1 Kathryn A. Nolan

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Debtor 1 Kathryn A. Nolan

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Kathryn A. Nolan				Case number (if k	nown)		
Part	6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily busine money for a business or investme					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe the	nat are not consum	er debts or business de	bts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. G	o to line 18.				
	Do you estimate that after any exempt	☐ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be availab			is excluded and administrative expenses		
	property is excluded and administrative expenses		□ No					
	are paid that funds will be available for		□Yes					
	distribution to unsecured creditors?		00					
18.	How many Creditors do	1 -49		□ 1,000-5,000		□ 25,001-50,000		
	you estimate that you	■ 1-49 ■ 50-99		☐ 5001-10,000		☐ 50,001-100,000		
	owe?	☐ 100-1		1 0,001-25,00	0	☐ More than100,000		
		□ 200-9	99					
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 -	\$10 million	□ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	\$50,0	01 - \$100,000	\$10,000,001		□ \$1,000,000,001 - \$10 billion		
	be worth:		001 - \$500,000	□ \$50,000,001		\$10,000,000,001 - \$50 billion		
		□ \$500,	001 - \$1 million	□ \$100,000,001	I - \$500 million	☐ More than \$50 billion		
20.	How much do you	\$0 - \$	50,000	□ \$1,000,001 -	\$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	□ \$50,0	001 - \$100,000	□ \$10,000,001		\$1,000,000,001 - \$10 billion		
			001 - \$500,000	□ \$50,000,001		\$10,000,000,001 - \$50 billion		
		□ \$500,	001 - \$1 million	□ \$100,000,001	- \$500 million	☐ More than \$50 billion		
Part	7: Sign Below							
For	you	I have ex	amined this petition, and I declare	under penalty of pe	erjury that the information	on provided is true and correct.		
			chosen to file under Chapter 7, I an tates Code. I understand the relief			er Chapter 7, 11,12, or 13 of title 11, e to proceed under Chapter 7.		
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request	relief in accordance with the chapt	er of title 11, United	d States Code, specified	d in this petition.		
		bankrupt and 3571	cy case can result in fines up to \$2			operty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Kathryr	A. Nolan e of Debtor 1		Signature of Debtor 2			
		Executed	d on April 28, 2017		Executed on			
			MM / DD / YYYY			D / YYYY		

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Debtor 1 Kathryn A. Nolan Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Dekova	an Bowler	Date	April 28, 2017
Signature of	f Attorney for Debtor		MM / DD / YYYY
Dekovan E	Bowler		
Printed name			
	Associates P.C.		
Firm name			
8333 S.E.	15th Street		
Midwest C	City, OK 73110		
Number, Street,	City, State & ZIP Code		
Contact phone	405-733-3000 Office	Email address	dlbowler@hotmail.com
15193			
Bar number & S	Itate		

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						4/28/17 5:33PM
Fill	in this info	ormation to identify your	case:			
Del	otor 1	Kathryn A. Nolan	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
		Bankruptcy Court for the:	WESTERN DISTRICT O			
		bankruptcy Court for the.	WEGTERN DIGTRIGT	SI OKLAHOWA		
	se number				_	eck if this is an ended filing
		Form 106Sum	and Liabilities ar	nd Certain Statistical Information		12/15
Be a	s complet rmation. F	te and accurate as possib	le. If two married people es first; then complete the	e are filing together, both are equally responsible for information on this form. If you are filing amend the box at the top of this page.		/ing correct
Par	t 1: Sun	nmarize Your Assets			Your	assets
						e of what you own
1.		e A/B: Property (Official Fo			\$_	40,153.00
	1b. Copy	line 62, Total personal pro	perty, from Schedule A/B		\$_	11,925.00
	1c. Copy	line 63, Total of all property	on Schedule A/B		\$_	52,078.00
Par	t 2: Sun	nmarize Your Liabilities				
					Your	liabilities
						unt you owe
2.		e D: Creditors Who Have Co the total you listed in Colum		(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$_	29,835.20
3.		e E/F: Creditors Who Have the total claims from Part		l Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$_	0.00
	3b. Copy	the total claims from Part	2 (nonpriority unsecured c	laims) from line 6j of Schedule E/F	\$_	12,615.00
				Your total liabilities	\$	42,450.20
Par	t 3: Sun	nmarize Your Income and	Expenses			
4.		e I: Your Income (Official Four combined monthly incom		÷1	\$_	1,914.00
5.	Schedule Copy you	e J: Your Expenses (Official or monthly expenses from li	Form 106J) ne 22c of <i>Schedule J</i>		\$_	1,319.00
Par	t 4: Ans	wer These Questions for	Administrative and Stati	istical Records		
6.	-	filing for bankruptcy undo You have nothing to report	• • • • • • • • • • • • • • • • • • • •	heck this box and submit this form to the court with yo	ur other s	schedules.
7.	■ Yes What kin	nd of debt do you have?				
				debts are those "incurred by an individual primarily for by for statistical purposes. 28 U.S.C. § 159.	a person	al, family, or
		or debts are not primarily court with your other sched		ve nothing to report on this part of the form. Check this	s box and	submit this form to

Case: 17-11856 Doc: 1 Filed: 05/11/17 Page: 9 of 47

Debtor 1 Kathryn A. Nolan Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 2,636.40

4/28/17 5:33PM

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim	1
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill in this inf	formation to identify y	our case and th	nis filing:					4/28/17 5:33P	
Debtor 1	Kathryn A. No		no ming.						
DCDIOI 1	First Name		e Name	Last Name					
Debtor 2 (Spouse, if filing)	First Name	Middle	e Name	Last Name					
United States	Bankruptcy Court for the	ne: WESTERN	I DISTRICT OF	OKLAHOMA					
Case number								Check if this is an	
								amended filing	
~									
	Form 106A/B	.							
Schedi	ule A/B: Pro	operty						12/15	
□ No. Go to ■ Yes. Whe	Part 2. ere is the property?		What is the m	roperty? Check all that seek					
	.E. 39th Street		•	roperty? Check all that apply	Do not do	luct cooured ale		or everentions. Dut	
Street addre	Street address, if available, or other description			Single-family home Duplex or multi-unit building Condominium or cooperative		Do not deduct secured claims or exenthe amount of any secured claims on Creditors Who Have Claims Secured		ms on Schedule D:	
			☐ Manufa	actured or mobile home	Current va	lue of the	Cu	rrent value of the	
City	oma City OK State	73111-0000 ZIP Code	· _		entire pro	perty? 40,153.00	poi	rtion you own? \$40,153.00	
Oity	Cidio	211 0000	_	☐ Investment property ☐ Timeshare		cribe the nature of your ownership in			
			☐ Other Who has an i	nterest in the property? Check o	(such as f		simple, tenancy by the entireties, o		
			Debtor		Fee sim	• •			
	oma		☐ Debtor	Ť					
Oklaho			_	1 and Debtor 2 only t one of the debtors and another		k if this is com	muni	ity property	
County					,	,			
				ation you wish to add about thi utification number:	o nom, ouon uo n	ocai			
				=	o nom, outil do n	ocai			

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Case: 17-11856 Doc: 1 Filed: 05/11/17 Page: 11 of 47 4/28/17 5:33PM Debtor 1 Kathryn A. Nolan Case number (if known) 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another 2007 GMC Yukon (Over 100.000 \$7,500.00 \$7,500.00 miles) ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$7,500.00 .pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ■ Yes. Describe..... **Household Goods & Furnishings** \$3,500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe.....

Official Form 106A/B Schedule A/B: Property page 2

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

10. Firearms

☐ Yes. Describe.....

Case: 17-11856 Doc: 1 Filed: 05/11/17 Page: 12 of 47 4/28/17 5:33PM Debtor 1 Kathryn A. Nolan Case number (if known) 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$900.00 Personal Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4,400.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... **CHECKING** \$25.00 17.1. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

■ No

☐ Yes. Give specific information about them

Issuer name:

Case: 17-11856 Doc: 1 Filed: 05/11/17 Page: 13 of 47 4/28/17 5:33PM Case number (if known) Debtor 1 Kathryn A. Nolan 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

Official Form 106A/B Schedule A/B: Property page 4 Case: 17-11856 Doc: 1 Filed: 05/11/17 Page: 14 of 47

Deb	tor 1	Kathryn A. Nolan		Case number (if known)	
_	If you a	erest in property that is due you from someone who have the beneficiary of a living trust, expect proceeds from ane has died.		are currently entitled to rec	eive property because
	Yes.	Give specific information			
	<i>Examp</i> I No	against third parties, whether or not you have filed a les: Accidents, employment disputes, insurance claims, o		nd for payment	
	Yes.	Describe each claim			
	No	contingent and unliquidated claims of every nature, income Describe each claim	cluding counterclaims o	of the debtor and rights to	o set off claims
		ancial assets you did not already list			
	No				
	Yes.	Give specific information			
36.		he dollar value of all of your entries from Part 4, includent 4. Write that number here			\$25.00
Part	5: Des	scribe Any Business-Related Property You Own or Have an In	terest In. List any real estat	te in Part 1.	
_	-	own or have any legal or equitable interest in any business-re	lated property?		
	No. Go	to Part 6.			
	Yes. G	o to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interes	t In.	
46. I	Do you	own or have any legal or equitable interest in any fare	m- or commercial fishing	g-related property?	
	■ No.	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That	You Did Not List Above		
53. I		have other property of any kind you did not already li	st?		
	<i>Examp</i> I No	les: Season tickets, country club membership			
	Yes.	Give specific information			
54.	Add tl	he dollar value of all of your entries from Part 7. Write	that number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$40,153.00
56.	Part 2	: Total vehicles, line 5	\$7,500.00		
57.	Part 3	: Total personal and household items, line 15	\$4,400.00		
58.		: Total financial assets, line 36	\$25.00		
59.		: Total business-related property, line 45	\$0.00		
60.		: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54	+\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$11,925.00	Copy personal property	total \$11,925.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$52,078.00

Official Form 106A/B Schedule A/B: Property page 5

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De	in this inform	ation to identify your case	e :								
	btor 1										
D.		Kathryn A. Nolan									
	btor 2	First Name	Middle Name	L	ast Name						
	ouse if, filing)	First Name	Middle Name	L	ast Name						
Un	ited States Ban	kruptcy Court for the: W	ESTERN DISTRICT OF C	OKLAH	HOMA						
Ca	se number										
	nown)					☐ Check if this is an amended filing					
~ 1	ficial Ear	m 106C									
	ficial For			•							
<u>></u>	cnedule	C: The Prop	erty You Cla	aim	as Exempt	4/16					
he nee cas	property you lis ded, fill out and e number (if kno	ted on Schedule A/B: Prope attach to this page as man own).	erty (Official Form 106A/B y copies of <i>Part 2: Additio</i>) as yo nal Pa	our source, list the property that you age as necessary. On the top of any	additional pages, write your name and					
pe iny un exe	cific dollar am applicable sta ds—may be un mption to a pa	ount as exempt. Alternati ututory limit. Some exemp ulimited in dollar amount.	vely, you may claim the tions—such as those fo However, if you claim ar	full fai r healt n exen	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu	One way of doing so is to state a ing exempted up to the amount of penefits, and tax-exempt retirement the under a law that limits the t, your exemption would be limited					
Pa	rt 1: Identify	the Property You Claim a	as Exempt								
1.	Which set of	exemptions are you claim	ing? Check one only, eve	en if yo	our spouse is filing with you.						
	You are cla	You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
	_	iming federal exemptions.									
2			3 (),()	omnt	fill in the information below.						
۷.		on of the property and line on	•	• •	ount of the exemption you claim	Specific laws that allow exemption					
		hat lists this property	portion you own	Aiii	ount of the exemption you ofain	opcome laws that allow exemption					
		Copy the value from Check only one box for each exemption. Schedule A/B									
		oth Street Oklahoma Ci Oklahoma County	ty, \$40,153.00		\$10,317.80	Okla. Stat. tit. 31, §§ 1(A)(1),(2); Okla. Stat. tit. 31, §					
	Line from Sche	edule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2					
		ukon (Over 100.000	\$7,500.00		\$7,500.00	Okla. Stat. tit. 31, § 1(A)(13)					
	miles) Line from School	edule A/B: 3.1			100% of fair market value, up to any applicable statutory limit						
	Household (Goods & Furnishings	\$3,500.00		\$3,500.00	Okla. Stat. tit. 31, § 1(A)(3)					
	Line from Gene	oddio A/D. VII			100% of fair market value, up to any applicable statutory limit						
	Personal Clo	othing edule A/B: 11.1	\$900.00		\$900.00	Okla. Stat. tit. 31, § 1(A)(7)					
	Line from Gon	oddio 77 B. TTT			100% of fair market value, up to any applicable statutory limit						
3.		ning a homestead exempti ustment on 4/01/19 and eve			iled on or after the date of adjustme	nt.)					

Official Form 106C

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Debtor 1 Kathryn A. Nolan Case number (if known)

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						<u></u>	4/28/17 5:33PM
Fill	in this informa	ation to identify you	ur case:				
Deb	tor 1	Kathryn A. Nola	an				
	_	First Name	Middle Name L	ast Name			
	tor 2 use if, filing)	First Name	Middle Name L	ast Name			
Unit	ed States Bank	cruptcy Court for the	: WESTERN DISTRICT OF OKLAH	HOMA			
Cas	e number						
(if kno	own)						if this is an ded filing
Off	icial Form	106D					
			s Who Have Claims Se	ecure	d by Propert	y	12/15
is ne			If two married people are filing together, out, number the entries, and attach it to t				
1. Do	any creditors ha	ave claims secured b	y your property?				
	☐ No. Check t	his box and submit t	his form to the court with your other sc	hedules. Y	ou have nothing else t	o report on this form.	
	Yes. Fill in a	all of the information	below.				
Par	1: List All	Secured Claims					
for e	ach claim. If mor	e than one creditor has	more than one secured claim, list the creditors a particular claim, list the other creditors in ical order according to the creditor's name.		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	WENDOVE	R FINANCIAL	Describe the property that secures the	claim:	\$29,835.20	\$40,153.00	\$0.00
	Creditor's Name		1600 N.E. 39th Street Oklahom City, OK 73111 Oklahoma Cou	a			
		Regional Road o, NC 27409	As of the date you file, the claim is: Che apply. Contingent	_			
	Number, Street, C	city, State & Zip Code	Unliquidated				
Who	owes the deb	t? Check one.	☐ Disputed Nature of lien. Check all that apply.				
	Debtor 1 only		☐ An agreement you made (such as more	rtgage or sec	cured		
	ebtor 2 only		car loan)				
	Debtor 1 and Debt	tor 2 only	☐ Statutory lien (such as tax lien, mecha	nic's lien)			
		debtors and another	☐ Judgment lien from a lawsuit				
	theck if this clai community debt		Other (including a right to offset)	rst Mortg	jage		
Date	debt was incur	red <u>04/07</u>	Last 4 digits of account number	6186			
Ad	d the dollar valu	ue of your entries in C	Column A on this page. Write that number	here:	\$29,83	35.20	
	his is the last pa		the dollar value totals from all pages.		\$29,83	35.20	
			or a Debt That You Already Listed				
tryin than	g to collect fron	n you for a debt you o	e notified about your bankruptcy for a de owe to someone else, list the creditor in F t you listed in Part 1, list the additional cr nis page.	Part 1, and th	hen list the collection a	gency here. Similarly, if	you have more
Name, Number, Street, City, State & Zip Code BAER & TIMBERLAKE, COULSON & CATES, P.C. Attn: Jordan L. Southerland P.O. BOX 18486 On which line in Part 1 did you enter the last 4 digits of account number 198							
		City, OK 73154-0	1486				

Official Form 106D

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		Od50: 17	11000 200. 1	i lica. o	J, 11, 1	1 age. 10	01 41	4/2	28/17 5:33PM
Fill in	this inform	nation to identify your cas	se:						
Debto	r 1	Kathryn A. Nolan							
		First Name	Middle Name	Last Name)				
Debto	r 2 if, filing)	First Name	Middle Name	Last Name					
(Spouse	ii, iiiiig)	Filst Name	Middle Name	Last Name	;				
United	l States Bar	nkruptcy Court for the: V	VESTERN DISTRICT (OF OKLAHOMA					
Case i	number						_	eck if this is a	an
							am	ended filing	
Offic	ial Form	n 106E/F							
		/F: Creditors Wh	o Have Unsecu	red Claims	s			12/1	5
chedu eft. Atta ame a	le D: Credito ach the Con nd case num	tory Contract's and Unexpired ors Who Have Claims Secure tinuation Page to this page. I nber (if known).	d by Property. If more sp if you have no informatio	ace is needed, co	py the Part	t you need, fill it out,	number the entri	ies in the boxe	es on the
Part 1		I of Your PRIORITY Unse							
_		rs have priority unsecured c	laims against you?						
	No. Go to Pa	art 2.							
	Yes.								
ide po:	entify what typ ssible, list the	priority unsecured claims. If be of claim it is. If a claim has be claims in alphabetical order a than one creditor holds a partic	oth priority and nonpriority ccording to the creditor's n	amounts, list that on ame. If you have m	laim here a	and show both priority a	nd nonpriority am	nounts. As muc	h as
(Fo	or an explana	ation of each type of claim, see	the instructions for this for	m in the instruction	booklet.)				
						Total claim	Priority amount	Nonprio amount	rity
2.1	IRS		Last 4 digits of	account number	0335	\$0.00		.00	\$0.00
	55 NOR	editor's Name TH ROBINSON na City, OK 73104	When was the	debt incurred?					•
		reet City State Zlp Code	As of the date	you file, the claim	is: Check a	all that apply			
V	Vho incurred	I the debt? Check one.	☐ Contingent						
	Debtor 1 o	nly	☐ Unliquidated	I					
	Debtor 2 o	nly	☐ Disputed						
	Debtor 1 a	nd Debtor 2 only	•	ITY unsecured cla	im:				
_	_	e of the debtors and another	☐ Domestic su	pport obligations					
_	_	his claim is for a community	debt Taxes and o	ertain other debts y	ou owe the	government			
Is the claim subject to offset?						•			
_	No	•	☐ Other. Spec						
	☐ Yes			NOTICE OI	NLY				

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Debtor 1 Kathryn A. Nolan		4/28/17 5:33PM	
2.2 OKLAHOMA TAX COMMISSION	Last 4 digits of account number 0	335 \$0.00	\$0.00 \$0.00
Priority Creditor's Name LEGAL DIVISION	When was the debt incurred?		
P.O. BOX 26960	_		
Oklahoma City, OK 73126	As a feet a large of the discrete to		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply	
<u> </u>	☐ Contingent		
■ Debtor 1 only	Unliquidated		
Debtor 2 only	☐ Disputed		
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
At least one of the debtors and another	☐ Domestic support obligations		
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you	owe the government	
Is the claim subject to offset?	☐ Claims for death or personal injury	while you were intoxicated	
No	Other. Specify		
Yes	NOTICE ONL	Υ	
 List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. 	laim. For each claim listed, identify what t	ype of claim it is. Do not list claims al	ready included in Part 1. If more
4.1 ALLIANCE HEALTH DEACONESS	Last 4 digits of account number	0335	\$7,230.00
Nonpriority Creditor's Name Attn: Billing Dept. 5501 N. Portland Oklahoma City, OK 73112	When was the debt incurred?	1/2016	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you	did not
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Medical		

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4/28/17 5:33PM Case number (if know) Debtor 1 Kathryn A. Nolan \$2,230.00 4.2 **ASPIRE VISA** Last 4 digits of account number 2537 Nonpriority Creditor's Name P.O. BOX 23007 When was the debt incurred? 02/2007 Columbus, GA 31902-3007 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.3 **BAPTIST ER PHYSICIANS** Last 4 digits of account number 0000 \$183.00 Nonpriority Creditor's Name PO BOX 960071 When was the debt incurred? 08/2008 Attn: Business Office Oklahoma City, OK 73196 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify **DENTAL DEPOT** \$246.00 4.4 Last 4 digits of account number 0595 Nonpriority Creditor's Name **5691 TINKER DIAGONAL** When was the debt incurred? 07/2012 Midwest City, OK 73110 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Other. Specify Dental ☐ Yes

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4/28/17 5:33PM Case number (if know) Debtor 1 Kathryn A. Nolan 4.5 **FIRST ACCESS** Unknown Last 4 digits of account number 0335 Nonpriority Creditor's Name P.O. Box 89028 When was the debt incurred? 1/2015 Sioux Falls, SD 57109 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes 4.6 **HSBC** Last 4 digits of account number 3967 \$447.00 Nonpriority Creditor's Name PO BOX 5244 When was the debt incurred? 03/2010 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes **INTEGIS BAPTIST MEDICAL** 0335 Unknown 4.7 **CENTER** Last 4 digits of account number Nonpriority Creditor's Name 3030 N.W. EXPRESSWAY, SUITE When was the debt incurred? 1/2016 225 Oklahoma City, OK 73112-5434 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent □ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Medical

Other. Specify

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4/28/17 5:33PM Case number (if know) Debtor 1 Kathryn A. Nolan 4.8 \$49.00 MEDICAL PLAZA IMAGING Last 4 digits of account number 4096 Nonpriority Creditor's Name 3330 NW 56TH ST. When was the debt incurred? 07/09 **SUITE 206** Oklahoma City, OK 73112 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical Other. Specify 4.9 **VERVE MASTERCARD** Last 4 digits of account number 0335 Unknown Nonpriority Creditor's Name When was the debt incurred? P.O. Box 8099 1/2015 Newark, DE 19714 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card purchases ☐ Yes 4.1 WORKS & LENTZ INC. 0335 \$2,230,00 Last 4 digits of account number 0 Nonpriority Creditor's Name 3030 NW Expressway Suite 1300 When was the debt incurred? 1/2015 Oklahoma City, OK 73112 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collections Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be

notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

DENTAL DEPOT (South)

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Schedule E/F: Creditors Who Have Unsecured Claims Official Form 106 F/F

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			4/28/17 5:33PN
Debtor 1 Kathryn A. Nolan		Case number (if know)	
1024 S.W. 104th Street Oklahoma City, OK 73139		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
IRS	Line 2.1 of (<i>Check one</i>):	■ Part 1: Creditors with Priority Unsecured Claims	
P.O. BOX 21126 Philadelphia, PA 19114-0326		☐ Part 2: Creditors with Nonpriority Unsecured Claims	
rimadelpina, r.A. 19114-0320	Last 4 digits of account number	0335	
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
KANSAS COUNSELORS	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
1421 N SANT PAUL ST Wichita, KS 67203		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Wichita, NO 07203	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
MEDICAL PLAZA IMAGING	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
C/O CREDIT COLLECTIONS INC PO BOX 60607		Part 2: Creditors with Nonpriority Unsecured Claims	
Oklahoma City, OK 73146			
•	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
MIDLAND FUNDING	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
IN C/O: MIDLAND CREDIT 8875 AERO Drive		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Suite 200			
San Diego, CA 92123			
•	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
MILLENIUM FINANCIAL GROUP	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
5770 NW EXPRESSWAY SUITE 102 Oklahoma City, OK 73132		Part 2: Creditors with Nonpriority Unsecured Claims	
Oklanoma Oky, OK 13132	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
MILLENIUM FINANCIAL GROUP	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
5770 NW EXPRESSWAY SUITE 102 Oklahoma City, OK 73132		Part 2: Creditors with Nonpriority Unsecured Claims	
Original Oity, Oit 13132	Last 4 digits of account number		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Γotal Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 12,615.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 12,615.00

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Debtor 1 Kathryn A. Nolan Case number (if know)

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Fill in this infor	mation to identify your	case:		
Debtor 1	Kathryn A. Nolan			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT	OF OKLAHOMA	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

4/28/17 5:33PM

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the c	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	-

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	0000. 1	7 11000 200.	1 1100. 00/11/	17 1 age. 20	4/28/17 5:33PN
Fill in this	s information to identify your	case:			
Debtor 1	Kathryn A. Nolar	1			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fil	ing) First Name	Middle Name	Last Name		
	ates Bankruptcy Court for the:	WESTERN DISTRICT	OF OKLAHOMA		
Case num	shor				
(if known)					☐ Check if this is an amended filing
Officia	l Form 106H				
	dule H: Your Cod	lahtors			12/15
Scrie	dule II. Toul Cou	ientoi 3			12/13
ill it out, a		e boxes on the left. Attack). Answer every question	n the Additional Page t i.	o this page. On the to	needed, copy the Additional Page, p of any Additional Pages, write
_	you have any occupions. (iii	you are ming a joint oace,	do not list officer spoude	as a codestor.	
■ No					
☐ Ye	S				
	thin the last 8 years, have yona, California, Idaho, Louisiana				ty states and territories include)
■ No	. Go to line 3.				
☐ Ye	s. Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
in line Form	e 2 again as a codebtor only	if that person is a guarar	itor or cosigner. Make	sure you have listed t	ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and 2	IIP Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	ne
	Name			☐ Schedule E/F,	line
				☐ Schedule G, lii	ne
,	Number Street City	State	ZIP Code	_	
				Под 11 5 %	
3.2	Name			☐ Schedule D, lir ☐ Schedule E/F,	
				☐ Schedule G, lii	
	Number Street			_	
	City	State	ZIP Code		

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						-					
Fill	in this information to identify your c	ase:									
Deb	otor 1 Kathryn A. I	Nolan									
	otor 2 use, if filing)				_						
Unit	ted States Bankruptcy Court for the	E WESTERN DISTRICT	OF OKLAHOMA								
	se number 					Check if this is: An amende A supplement	nt show	ing postpetition following date:			
Of	fficial Form 106I					MM / DD/ Y		Tollowing date.			
So	chedule I: Your Inc	ome				ו /טט / וווווו			12/15		
supp spou attac	is complete and accurate as pos- plying correct information. If you use. If you are separated and you ch a separate sheet to this form. t1: Describe Employment	are married and not filir ir spouse is not filing wi	ng jointly, and your s th you, do not inclu	spouse i de infori	is liv matic	ing with you, inclu on about your spo	ude info use. If n	rmation about nore space is	your needed,		
1.	Fill in your employment		Debtor 1			Dobtor 2	Debtor 2 or non-filing spouse				
	information. If you have more than one job, attach a separate page with information about additional employers.		■ Employed			□ Emplo		ming spouse			
		n a separate page with Employment status nation about additional				☐ Not e	•				
		Occupation	Medical Suppor	t Assis	tant						
	Include part-time, seasonal, or self-employed work.	Employer's name	VETERANS ADM (405) 456 1000	ION							
	Occupation may include student or homemaker, if it applies.	Employer's address	921 N.E. 13th Street Oklahoma City, OK 73111								
		How long employed the	here? 4 Month	ns (Pd	Bi v	vkly)					
Par	t 2: Give Details About Mo	nthly Income		`							
spou If you	mate monthly income as of the duse unless you are separated. u or your non-filing spouse have mean space, attach a separate sheet to	ate you file this form. If your than one employer, co	, c	•				•	J		
nore	o space, attach a separate sheet to	uns ioiii.				For Debtor 1		ebtor 2 or iling spouse			
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,636.40	\$	N/A			
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A			
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	2,636.40	\$_	N/A			

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Debt	tor 1	Kathryn A. Nolan	_	Ca	ase number (<i>if kn</i>	own)				
				I	For Debtor 1			Debtor		
	Cop	by line 4 here	4.	-	2,636	.40	\$		N/A	_
_										
5.		all payroll deductions:	- -	,	• • • •	. 40	Φ.			
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.		§ 323 § 0	.00	\$_ \$		N/A N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		: —	.00	\$_		N/A	_
	5d.	Required repayments of retirement fund loans	5d.		·	.00	\$_		N/A	_
	5e.	Insurance	5e.		399		\$		N/A	_
	5f.	Domestic support obligations	5f.	9	6	.00	\$		N/A	- -
	5g.	Union dues	5g.			.00	\$_		N/A	_
	5h.	Other deductions. Specify:	_ 5h.	.+ :	0	.00	+ \$_		N/A	<u>-</u>
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	722	.40	\$_		N/A	<u>-</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,914	.00	\$_		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
	٠.	monthly net income.	8a.			.00	\$_		N/A	_
	8b.	Interest and dividends	8b.	. :	<u> </u>	.00	\$_		N/A	<u>-</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	ç	5 o	.00	\$		N/A	
	8d.	Unemployment compensation	8d.		·	.00	\$-		N/A	_
	8e.	Social Security	8e.		·	.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	Ç	5 O	.00	\$		N/A	_
	8g.	Pension or retirement income	 8g.	. 9		.00	\$		N/A	_
	8h.	Other monthly income. Specify:	8h.	.+ 3	6	.00	+ \$_		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0	.00	\$_		N/	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	1,914.00	+ \$		N/A	= \$	1,914.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		· —	.,011100	` -			' -	1,011100
11.	State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00									
12.		If the amount in the last column of line 10 to the amount in line 11. The respect that amount on the Summary of Schedules and Statistical Summary of Certaillies						12.	\$Combi	
12	Do.	you expect an increase or decrease within the year after you file this form	2						month	ly income
13.		No.	•							
	ш	Yes. Explain:								

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Fill	in this informa	ation to identify yo	our case:							
Deb	tor 1	Kathryn A. N	lolan			Check if this is:				
Deb	otor 2						An amended filing	wing postpetition chapter		
	ouse, if filing)							the following date:		
Unit	ed States Bank	ruptcy Court for the	: WESTE	ERN DISTRICT OF OKLAH	HOMA		MM / DD / YYYY			
Cas	e number									
(If kı	nown)									
Of	fficial Fo	orm 106J								
Sc	chedule	J: Your	Exper	nses				12/15		
Be info	as complete ormation. If n nber (if know	and accurate as	s possible eded, atta ry questio	. If two married people ar ich another sheet to this						
1.	Is this a joi		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
	■ No. Go to	o line 2. es Debtor 2 live	in a separ	ate household?						
		-	st file Offic	al Form 106J-2, <i>Expenses</i>	for Separate Househ	old of Del	btor 2.			
2.	Do you hav	e dependents?	□ No							
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?		
	Do not state	the						□ No		
	dependents	names.			Son		9 Years	Yes		
								□ No □ Yes		
								□ Yes		
								☐ Yes		
								□ No		
								☐ Yes		
3.		penses include of people other t	han	No						
		d your depende		Yes						
Est exp	imate your e	a date after the	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp						
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i>)			Your exp	enses		
4.	The rental or home ownership expenses for your residence. Include first payments and any rent for the ground or lot.			nclude first mortgage	4.	\$	0.00			
	. ,	ded in line 4:	-							
	4a. Real	estate taxes				4a.	\$	0.00		
		erty, homeowner's	s, or renter	's insurance		4b.	·	0.00		
				upkeep expenses		4c.	\$	0.00		
_		eowner's associat				4d.	·	0.00		
5.	Additional	mortgage payme	ents for yo	our residence , such as ho	me equity loans	5.	\$	0.00		

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6. Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, litternet, satellite, and cable services 6c. S	Deb	tor 1	Kathryn	A. Nolan	Case num	nber (if known)	
6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, internet, satellite, and cable services 6c. S. 0.00 6d. Other, Specify: Internet Cell Phone 7. Pood and housekeeping supplies 7. S. 556.00 7. Pool and housekeeping supplies 8. Childcare and children's education costs 9. S. 556.00 9. Clothing, laundry, and dry cleaning 9. S. 162.00 10. Personal care products and services 10. S. 0.00 11. Medical and dental expenses 11. S. 55.00 12. Transportation. Include gas. maintenance, bus or train fare. 12. S. 202.00 13. Eletertainment, clubs, recreation, newspapers, magazines, and books 13. S. 0.00 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. S. 0.00 15c. Vehicle insurance 15c. Vehicle insurance 15d. Charitable insurance specify 15d. Charitable insurance specify 15d. Charitable rinsurance, specify 15d. Septify: 17b. Car payments for Vehicle 1 17c. Car payments for Vehicle 2 17c. Cotter, Specify: 17d. Car payments for Vehicle 2 17d. Cotter, Specify: 17d. Cotter payments or almony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 108). 17d. Cotter, Specify: 17d. Cotter Cotter Specify: 17d. Co	6.	Utilit	ies:				
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other, Specify: Internet Cell Phone Cell Phone Self-Other Specify: Internet Cell Phone Self-Other Specify: Specify: Specify Sp		6a.	Electricity,	heat, natural gas	6a.	\$	176.00
6d. S 22.00		6b.	Water, sev	wer, garbage collection	6b.	\$	45.00
Cell Phone		6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
7. Food and housekeeping supplies Childcare and children's education costs Childcare and children's education costs Clothing, laundry, and dry cleaning Clothing, laundry, and clothing, laundry, laun		6d.	Other. Spe	ecify: Internet	6d.	\$	22.00
8. Childcare and children's education costs 10. Clothing, laundry, and dry cleaning 10. Personal care products and services 10. \$			Cell Pho	ne		\$	45.00
9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. S 0.00 11. Medical and dental expenses 11. S 55.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. Transportation. Include gas, maintenance, bus or train fare. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. Entertainment, clubs, recreation on ewspapers, magazines, and books 14. S 0.00 15. Insurance 15. Charitable contributions and religious donations 15. Life insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. S 0.00 15b. Health insurance 15c. S 0.00 15c. Vehicle insurance 15c. S 0.00 15d. Other insurance. Specify: 15d. S 0.00 15d. Other insurance. Specify: 15d. S 0.00 15d. Other insurance. Specify: 15d. S 0.00 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15p. Equipments of Vehicle 1 17a. S 0.00 17b. Car payments for Vehicle 2 17b. S 0.00 17c. Other. Specify: 17c. S 0.00 17c. Other. Specify: 17c. S 0.00 17d. Other. Specify: 17d. S 0.00 17d. Other. Specify: 17d. Other. Specify: 17d. S 0.00 17d. Other. Specify: 17d. Specify: 17d	7.	Food	and house	ekeeping supplies		\$	-
10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. 13. S. Donot include car payments. 14. S. Donot include car payments. 15. Entertainment, clubs, recreation, newspapers, magazines, and books 16. Charitable contributions and religious donations 17. S. Donot include insurance deducted from your pay or included in lines 4 or 20. 18. Life insurance. 19. Do not include insurance deducted from your pay or included in lines 4 or 20. 18. Life insurance 18. S. O.00 19. On the insurance. Specify: 19. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 19. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 19. Car payments for Vehicle 1 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specily: 17c. Other. Specily: 17d. Other. Specily: 17d. Other. Specily: 17d. Other. Specily: 18. S. O.00 19. Other payments of altimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106), 18. S. O.00 19. Other payments of uniform, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106), 18. S. O.00 19. Other payments of altimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106), 18. S. O.00 19. Other payments of altimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106), 18. S. O.00 19. Other reportiy expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20a. S. O.00 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 22c. Add lines 24 stro	8.	Child	dcare and c	children's education costs	8.	\$	0.00
11. Medical and denal expenses 11. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	9.	Cloth	ning, laund	ry, and dry cleaning	9.	\$	162.00
12. Transportation. Include gas, maintenance, bus or train fare. 20 con or include car payments 12. \$ 202.00	10.	Pers	onal care p	products and services	10.	\$	0.00
Do not include car payments. 12. \$ 202.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. Vehicle insurance. 15d. \$ 0.00 15d. Taxes. Do not include laxe deducted from your pay or included in lines 4 or 20. 15d. Other insurance. Specify: 16. \$ 0.00 17d. Cher insurance. Specify: 17a. \$ 0.00 17b. Car payments for Vehicle 1 17a. \$ 0.00 17c. Cher. Specify: 17a. Car payments for Vehicle 2 17b. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other specify: 17d. Other payments or you make to support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i). 18 Your payments or Jalimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i). 19. Other ral property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses from bine 22c above. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your expenses within the year after you lile this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mongage payment to increase or decrease because of a modification to the terms of your mortgage?	11.	Medi	ical and der	ntal expenses	11.	\$	55.00
13	12.	Trans	sportation.	Include gas, maintenance, bus or train fare.			
14. Solution 15. Insurance						·	
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15b. S 0.00 15b. Health insurance 15c. Vehicle insurance Specify: 15c. Vehicle insurance. 15c. Vehicle insura						·	
Do not include insurance deducted from your pay or included in lines 4 or 20.				ributions and religious donations	14.	\$	0.00
15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15	15.						
15b. Health insurance 15c. Vehicle insurance 15c. United insurance 15c. United insurance. Specify: 15d. Specify: 15d. Specify: 16. Specify: 17a. Car payments for Vehicle 1 17a. Specify: 17c. Other. Specify: 17d. Specif					150	¢.	0.00
15c. Vehicle insurance. \$15c. \$ 56.00 15d. Other insurance. Specify: 15d. \$ 0.00 18. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$ 0.00 19. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 17d. Other specify: 17d. \$ 0.00 17d. Other specify: 17d. \$ 0.00 17d. Other payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i). \$ 0.00 19. Other payments you make to support others who do not live with you. \$ 0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Homeowner's association or condominium dues 20e. \$ 0.00 20d. Other: Specify: 21 +\$ 0.00 21. Other: Specify: 21 +\$ 0.00 22. Calculate your monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ 1,319.00 23. Calculate your monthly expenses from line 22c above. 23b. \$ 1,319.00 23b. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,914.00 23c. Subtract your monthly expenses from line 22c above. 23b. \$ 595.00 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?						· -	
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Fill in this ir	nformation to identify your	case:					
Debtor 1	Kathryn A. Nolan						
Dahtar 0	First Name	Middle Name	Las	Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Las	Name			
United State	s Bankruptcy Court for the:	WESTERN DISTRICT (OF OKLAHO	MA			
Case numbe	er						
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Declar	ation About a	ın Individual	Debte	or's Sched	dules		12/15
f two marrie	d people are filing togethe	r, both are equally respo	nsible for s	ipplying correct in	formation.		
You must file	e this form whenever you fi	le bankruptcy schedules	s or amende	d schedules. Makir	ng a false state	ement, concealin	a property, or
obtaining mo	oney or property by fraud in	n connection with a bank					
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	Sign Below						
	Oigii Delow						
Did you	u pay or agree to pay some	one who is NOT an attor	nev to heln	vou fill out bankru	ntov forms?		
Dia you	a pay or agree to pay some	one who is NOT an accor	ney to neip	you iiii out balikiu	picy forms:		
■ No)						
-	. New of severe				August Dan	laman tau a Da CC a sa Da	
∐ Y€	es. Name of person					kruptcy Petition Pr n, and Signature (C	
					Doolaration	, and oignature (c	2.11.01.01 T T T T T T T T T T T T T T T T T T T
	enalty of perjury, I declare y are true and correct.	that I have read the sum	mary and s	hedules filed with	this declaration	on and	
uiai uie	y are true and correct.						
X /s/	Kathryn A. Nolan		X				
	thryn A. Nolan			Signature of Debtor	r 2		
Sigr	nature of Debtor 1						
Date	e April 28, 2017			Date			

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Fil	l in this inforn	nation to identify yo	our case:					
	ebtor 1	Kathryn A. No						
		First Name	Middle Name	Las	Name			
	ebtor 2 ouse if, filing)	First Name	Middle Name	Las	Name			
Un	ited States Ba	nkruptcy Court for th	e: WESTERN DISTRICT	OF OKLAHO	MA			
	nse number						_	heck if this is an mended filing
St Be info	as complete a	of Financia	I Affairs for Indiversible. If two married peoped, attach a separate sheet Jestion.	le are filing to	ogether, both are	e equally responsi		
	<u> </u>	,	Marital Status and Where \	∕ou Lived Be	fore			
1.	What is you	r current marital sta	atus?					
	☐ Married ■ Not mar	ried						
2.	During the la	ast 3 years, have yo	ou lived anywhere other that	an where you	live now?			
	■ No □ Yes. Lis	t all of the places yo	u lived in the last 3 years. Do	o not include v	vhere you live no	w.		
	Debtor 1 Pr	ior Address:	Dates Debto lived there	r 1	Debtor 2 Prior A	ddress:		Dates Debtor 2 lived there
3. stat			ever live with a spouse or California, Idaho, Louisiana,					
	■ No □ Yes. Ma	ike sure you fill out S	Schedule H: Your Codebtors	(Official Form	106H).			
Pa	rt 2 Explai	n the Sources of Y	our Income					
4.	Fill in the tota	I amount of income	employment or from opera you received from all jobs ar ou have income that you rec	nd all busines:	ses, including par	t-time activities.	vious calen	dar years?
	□ No							
	Yes. Fill	in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.		ncome deductions and ons)	Sources of incommendation Check all that approximately		Gross income (before deductions and exclusions)

Official Form 107

■ Wages, commissions,

Operating a business

bonuses, tips

\$10,545.00

 \square Wages, commissions,

Operating a business

bonuses, tips

4/28/17 5:33PM

From January 1 of current year until the date you filed for bankruptcy:

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Debtor 1	¹ Ka	thryn A. N	lolan		Cas	Case number (if known)				
		•								
				Debtor 1		Debtor 2				
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)		
		dar year: December	31, 2016)	■ Wages, commissions, bonuses, tips	\$33,601.00	☐ Wages, comr bonuses, tips	missions,			
				☐ Operating a business		Operating a b	ousiness			
		dar year be December		■ Wages, commissions, bonuses, tips	\$35,788.00	☐ Wages, comr bonuses, tips	missions,			
				☐ Operating a business		☐ Operating a b	ousiness			
	each s	•	he gross inco	e and you have income that yome from each source separa	· ·	•				
				Debtor 1		Debtor 2				
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.	ome	Gross income (before deductions and exclusions)		
Part 3:	List	Certain Pa	yments You	Made Before You Filed for	Bankruptcy					
6. Are	No.	During the No. Yes	pettor 1 nor Deprimarily for a 90 days befor Go to line 7 List below a paid that crunot include to adjustment or Debtor 2 or 90 days befor Go to line 7 List below a include pay	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the con 4/01/19 and every 3 years r both have primarily consume you filed for bankruptcy, di	Imer debts. Consumer debtal dipurpose." In dipurpose." In dipurpose." In dipurpose." In dipurpose. In dipurpose. In dipurpose dipu	I of \$6,425* or more none or more payreations, such as chi or after the date of I of \$600 or more?	e? ments and the support a adjustment.	ne total amount you nd alimony. Also, do		
Cro	editor'	s Name and	d Address	Dates of payme	nt Total amount	Amount you	Was this r	payment for		
					paid	still owe		,		

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Case number (if known)

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 17 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partners more of their voting	erships of which you	ou are a general ny managing ag	partner; corporations gent, including one for	
	■ No□ Yes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment	
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi		nents or transfer a	ny property on a	ccount of a de	bt that benefited an	
	No						
	☐ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for to	his payment tor's name	
Pai	rt 4: Identify Legal Actions, Repossession	s. and Foreclosures					
	□ No ■ Yes. Fill in the details. Case title Case number WENDOVER FINANCIAL SERVICES vs. HARVEY NOLAN &	Nature of the case Court or agency CIVIL/ DISTRICT COURT OF FORECLOSURE OK;LAHOMA COUNTY		_	Status of the case Pending On appeal Concluded		
	KATHRYN NOLAN		320				
	CJ 2012-6186				Judgemen	t	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below. Creditor Name and Address		rty repossessed, f	oreclosed, garni	shed, attached	, seized, or levied? Value of the	
		Explain what happened				property	
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.	tcy, did any creditor, incl		nancial institution	n, set off any a	mounts from your	
	Creditor Name and Address	Describe the action the	creditor took	Date take	action was า	Amount	
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an No Yes		rty in the possessi	ion of an assigne	ee for the bene	fit of creditors, a	

Debtor 1 Kathryn A. Nolan

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De	otor 1 Kathryn A. Nolan		Case number	(if known)	
Pai	tt 5: List Certain Gifts and Contributions				
13.	■ No	otcy,	did you give any gifts with a total value of more t	han \$600 per person [°]	?
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	■ No		did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or con-				
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal	Describe what you contributed	Dates you contributed	Value
Pai	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankruptor gambling? ■ No □ Yes. Fill in the details.	tcy or	since you filed for bankruptcy, did you lose any	thing because of the	it, fire, other disaster
		locer	ibe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	nclude	e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	loss	lost
Pai	t 7: List Certain Payments or Transfers				
16.	consulted about seeking bankruptcy or pre	epari	id you or anyone else acting on your behalf payong a bankruptcy petition? rs, or credit counseling agencies for services require		rty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid		Description and value of any property	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not You	u	transferred	or transfer was	payment
	Bowler & Associates P.C. 8333 SE 15th Street Midwest City, OK 73110 DLBowler@hotmail.com		\$ 310.00 Court Costs	04/07/2017	\$310.00
17.	Within 1 year before you filed for bankrupto promised to help you deal with your creditor Do not include any payment or transfer that you	tors o		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
				Muuo	

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Debtor 1 Kathryn A. Nolan

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.							
	Person Who Received Transfer Address Person's relationship to you		•	Description and value of property transferred payments received or debts paid in exchange				
19.	Within 10 years before you filed for barbeneficiary? (These are often called ass No Yes. Fill in the details.			led trust or similar device	of which you are a			
	Name of trust		Description and	value of the pro	perty trai	nsferred	Date Transfer was made	
Par	rt 8: List of Certain Financial Account	s. Instr	uments. Safe Deposi	t Boxes, and S	torage Un	uits	made	
20.	Within 1 year before you filed for bank sold, moved, or transferred? Include checking, savings, money mar houses, pension funds, cooperatives, No Yes. Fill in the details.	ket, or c	other financial accou	nts; certificate:	s of depo			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of Type of account or instrument closed, sold, moved, or transferred						Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Co	ode)	Who else had acc Address (Number, S State and ZIP Code)		Describ	e the contents	Do you still have it?	
22.	Have you stored property in a storage No Yes. Fill in the details.	unit or p	place other than you	r home within 1	l year bef	ore you filed for bankrupto	cy?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Co	e the contents	Do you still have it?					
Par	rt 9: Identify Property You Hold or Co	ntrol fo	r Someone Else					
23.	Do you hold or control any property th for someone. No Yes. Fill in the details.	at some	eone else owns? Incl	ude any prope	rty you bo	orrowed from, are storing f	or, or hold in trust	
	Owner's Name Address (Number, Street, City, State and ZIP Co	Where is the prop (Number, Street, City, S Code)		Describ	e the property	Value		
Par	rt 10: Give Details About Environment	al Inforn	mation					

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 Kathryn A. Nolan

Case number (if known)

	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
	Hazardous material means anything an envi hazardous material, pollutant, contaminant,		waste, hazardous substance, toxic	substance,				
Rep	ort all notices, releases, and proceedings that	at you know about, regardless of wher	they occurred.					
24.	Has any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environm	ental law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of	any release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adm	ninistrative proceeding under any envi	ronmental law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Court or agency Nature of the case Status of the Case Number Address (Number, Street, City, State and ZIP Code)							
Par	11: Give Details About Your Business or 0	Connections to Any Business						
27.	Within 4 years before you filed for bankrupto	cy, did you own a business or have an	y of the following connections to any	y business?				
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time					
	☐ A member of a limited liability comp	any (LLC) or limited liability partnersh	ip (LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing exe	ecutive of a corporation						
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation						
	■ No. None of the above applies. Go to P	art 12.						
	Yes. Check all that apply above and fill		3 .					
	Business Name	Describe the nature of the business	Employer Identification numbe					
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN. Dates business existed					
28.	Within 2 years before you filed for bankruptoinstitutions, creditors, or other parties.	cy, did you give a financial statement t	to anyone about your business? Incl	ude all financial				
	■ No □ Yes. Fill in the details below.							
	Name Address	Date Issued						
	(Number, Street, City, State and ZIP Code)							

Part 12: Sign Below

I have read the answers on this *Statement* of *Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

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Debtor	1 Kathryn A. Nolan		Case number (if known)
are true	e and correct. I understand that making	a false statement, concealing pr	operty, or obtaining money or property by fraud in connection
	bankruptcy case can result in fines up t C. §§ 152, 1341, 1519, and 3571.	o \$250,000, or imprisonment for	up to 20 years, or both.
/s/ Ka	thryn A. Nolan		
Kathr	yn A. Nolan	Signature of Debtor 2	!
Signat	ture of Debtor 1		
Date	April 28, 2017	Date	
Did you	ı attach additional pages to <i>Your Statei</i>	ment of Financial Affairs for Indiv	riduals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you	ı pay or agree to pay someone who is r	not an attorney to help you fill ou	bankruptcy forms?
■ No			
☐ Yes.	Name of Person Attach the Bank	ruptcy Petition Preparer's Notice, [Declaration, and Signature (Official Form 119).

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Fill in this inform	Fill in this information to identify your case:					
Debtor 1	Kathryn A. Nolan					
Debtor 2 (Spouse, if filing)						
United States B	ankruptcy Court for the:	Western District of Oklahoma				
Case number (if known)						

Check	Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:							
 1. Disposable income is not determined un 11 U.S.C. § 1325(b)(3). 							
	 Disposable income is determined under 11 U.S.C. § 1325(b)(3). 						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

4/28/17 5:33PM

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

uuu	monar pagos, mino your name and cace names (ii							
Par	t 1: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one of	only.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11							
1 tl	ill in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6-ne 6 months, add the income for all 6 months and divide the tot pouses own the same rental property, put the income from that	month per al by 6. Fil	iod would I in the re	be March 1 throusult. Do not include	ugh August 3° de any income	1. If the ame amount m	ount of your monthly incom ore than once. For exampl	e varied during e, if both
					Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and co	mmissio	ons (before all	\$2,	636.40	\$	
3.	Alimony and maintenance payments. Do not includ Column B is filled in.	e payme	nts from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househout and roommates. Include regular contributions from a stilled in. Do not include payments you listed on line 3.	rt. Include old, your c spouse o	e regulai depende	r contributions nts, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or fa	arm \$	0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property	Debtor						
	Gross receipts (before all deductions)	\$_	0.00					
	Ordinary and necessary operating expenses	- \$	0.00		_	0.00		
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Case number (if known)

					Column A Debtor 1		Column B Debtor 2 or non-filing s		
7.	Intere	st, dividends, and royalties			\$	0.00	\$ 		
8.	Unem	ployment compensation			\$	0.00	\$		
		t enter the amount if you contend that the amount rece cial Security Act. Instead, list it here:	eived was a benefit un	der					
	For	you\$ your spouse \$	0.00						
	For	your spouse\$							
9.		on or retirement income. Do not include any amount tunder the Social Security Act.	received that was a		\$	0.00	\$		
10.	Do no	ne from all other sources not listed above. Specify to tinclude any benefits received under the Social Secured as a victim of a war crime, a crime against humanity stic terrorism. If necessary, list other sources on a separation.	ity Act or payments y, or international or						
					\$	0.00	\$		
					\$	0.00	\$		
		Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.		late your total average monthly income. Add lines 2 column. Then add the total for Column A to the total for		,	2,636.40	+ _		= \$_	2,636.40
12. 13.	Сору	Determine How to Measure Your Deductions from your total average monthly income from line 11						\$	2,636.40
	_	ou are not married. Fill in 0 below.							
	□ Y	ou are married and your spouse is filing with you. Fill	in 0 below.						
		ou are married and your spouse is not filing with you.							
	F d E a	fill in the amount of the income listed in line 11, Colum ependents, such as payment of the spouse's tax liabilitielow, specify the basis for excluding this income and adjustments on a separate page.	ity or the spouse's sup	por	t of someon	e other th	an you or your	depend	ents.
	lf	this adjustment does not apply, enter 0 below.							
			\$			_			
			+\$			_			
						_			
		Total	\$		0.0	0c	py here=>		0.00
14.	Your	current monthly income. Subtract line 13 from line	12.					\$	2,636.40
15.		ulate your current monthly income for the year. Fo	ollow these steps:						2 626 40
	15a.	Copy line 14 here=>						\$	2,636.40
		Multiply line 15a by 12 (the number of months in a year	ear).					X	12
	15b.	The result is your current monthly income for the year	ar for this part of the fo	rm.				\$	31,636.80

Kathryn A. Nolan

Debtor 1

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Kathryn A. Nolan Debtor 1 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. OK 2 16b. Fill in the number of people in your household. 16c. Fill in the median family income for your state and size of household. 56.532.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. 2.636.40 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 2,636.40 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 2,636.40 20a. Copy line 19b Multiply by 12 (the number of months in a year). **x** 12 31,636.80 20b. The result is your current monthly income for the year for this part of the form \$ 56,532.00 20c. Copy the median family income for your state and size of household from line 16c \$ 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Kathryn A. Nolan Kathryn A. Nolan Signature of Debtor 1 Date April 28, 2017 MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

4/28/17 5:33PM

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

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If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

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Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

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Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case: 17-11856 Doc: 1 Filed: 05/11/17 Page: 46 of 47

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Oklahoma

			we	stern District of Oklanom	a		
In re	e Kathryn A. No	olan			Case N	lo	
				Debtor(s)	Chapte	r 13	
				ENSATION OF ATTOR		•	
	compensation paid t	o me v	within one year before the fi	16(b), I certify that I am the attornous of the petition in bankruptcy, n of or in connection with the bank	or agreed to be p	aid to me, for se	
	For legal service	es, I h	nave agreed to accept		\$	3,100.0	00_
				d		0.0)0_
	Balance Due					3,100.0	00_
2.	\$ 310.00 of the		g fee has been paid.				
3.	The source of the co	mpen	sation paid to me was:				
	Debtor		Other (specify):				
4.	The source of comp	ensatio	on to be paid to me is:				
	Debtor		Other (specify):				
5.	■ I have not agree	d to sl	nare the above-disclosed cor	npensation with any other person u	unless they are m	embers and asso	ociates of my law firm.
				nsation with a person or persons w names of the people sharing in the			s of my law firm. A
6.	In return for the abo	ve-dis	sclosed fee, I have agreed to	render legal service for all aspects	of the bankrupto	cy case, includin	g:
	 b. Preparation and c. Representation of d. [Other provision Negotiation reaffirms] 	filing of the cost as no cost we construct the cost of	of any petition, schedules, st debtor at the meeting of cred eeded] vith secured creditors to	dering advice to the debtor in determent of affairs and plan which litors and confirmation hearing, and preduce to market value; exections as needed; preparation nousehold goods.	may be required d any adjourned mption planni	; hearings thereof ng; preparatio	on and filing of
7.	Represer	tatio		fee does not include the following dischargeability actions, judio		ınces, relief fro	om stay actions or
				CERTIFICATION			
	I certify that the forebankruptcy proceeding		is a complete statement of a	any agreement or arrangement for	payment to me for	or representation	of the debtor(s) in
	April 28, 2017			/s/ Dekovan Bowl	er		
_	Date			Dekovan Bowler 1			
				Signature of Attorney Bowler & Associa			
				8333 S.E. 15th Str			
				Midwest City, OK			
				405-733-3000 Office		55-3558 Fax	
				dlbowler@hotmai Name of law firm	i.com		
				rianie oj iaw jirni			

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United States Bankruptcy Court Western District of Oklahoma

		Western District of Oklahoma		
In re	Kathryn A. Nolan		Case No.	
		Debtor(s)	Chapter	13
	VEI	RIFICATION OF CREDITOR M	IATRIX	
The ab	ove-named Debtor hereby verifie	es that the attached list of creditors is true and cor	rrect to the best	of his/her knowledge.
Date:	April 28, 2017	/s/ Kathryn A. Nolan		
		Kathryn A. Nolan		

Signature of Debtor